

CIA INTERNAL USE ONLY

SECRET

(When Filled In)

PERSONALITY

FILE REQUEST

TO RI/ANALYSIS SECTION		DATE 22 JAN 57		ACTION	
		<input checked="" type="checkbox"/> OPEN		<input type="checkbox"/> AMEND	
FROM RI/AN/EE		MEANS		ROOM NO. 1512K	TELEPHONE
<p>INSTRUCTIONS: Form must be typed or printed in block letters.</p> <p>SECTION I: List [] number, name and identifying data in the spaces provided. All known aliases and variants (including maiden name, if applicable) must be listed. If the identifying data varies with the alias used, a separate form must be used. Write UNKNOWN for items you are unable to complete.</p> <p>SECTION II: List cryptonym or pseudonym, if assigned. If true name is sensitive, obtain 201 number from 201 Control Desk and complete Section I and Section III. On a separate form, enter the 201 number and complete Section II and Section III. Submit each form separately.</p> <p>SECTION III: To be completed in all cases.</p>					
SECTION I					
<input type="checkbox"/> SENSITIVE <input checked="" type="checkbox"/> NON-SENSITIVE		SOURCE DOCUMENT			
		EGBA 38083			
NAME (Last)		(Middle)		(First) (Title)	
LAECHERT		HILDEGARDE		LUISE	
NAME VARIANT					
TYPE NAME 2. (Last)		(Middle)		(First) (Title)	
A		BRIGITTE			
<div style="text-align: center; font-size: 2em; opacity: 0.5;">RECORD COPY</div>					
PHOTO 4. <input checked="" type="checkbox"/>		BIRTH DATE 5. 14 03 20		COUNTRY OF BIRTH 6. GERM	
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>				CITY OR TOWN OF BIRTH 7. BERLIN	
OCCUPATION/POSITION				OTHER IDENTIFICATION 8. 1. 2. 3.	
				OCC/POS. CODE 9.	
SECTION II					
CRYPTONYM			PSEUDONYM		
SECTION III					
COUNTRY OF RESIDENCE 10. WGER		ACTION DESK 11. EE/P		2ND COUNTRY INTEREST 12.	
				3RD COUNTRY INTEREST 12A.	
COMMENTS:					
<div style="text-align: center;"> <p>DECLASSIFIED AND RELEASED BY CENTRAL INTELLIGENCE AGENCY SOURCES METHODS EXEMPTION 3B2B NAZI WAR CRIMES DISCLOSURE ACT DATE 2001 2008</p> </div>					
PERMANENT CHARGE		RESTRICTED FILE		SIGNATURE	
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>			